STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received

COVER PAGE

Please type or print in ink.			2018 FEB	23 PM 2: 27
NAME OF FILER (LAST)	(FIRST)	tare i vincia i vinci		(MIDDLE)
Donnelly	James			100 11 B 200 11 10 1
1. Office, Agency, or Court				
Agency Name (Do not use acronyms)			· · · · · · · · · · · · · · · · · · ·	
Department of Conservation				
Division, Board, Department, District, if application	able	Your Position		
Div. of Oll, Gas. and Geothermal F	Resources	Engineering Geo	logist	
▶ If filing for multiple positions, list below or	on an attachment. (Do not use	acronyms)		
Agency:		Position:		
2. Jurisdiction of Office (Check at lea	st one box)			and the state of t
X State		☐ Judge or Court Com	missioner (State)	vide Jurisdiction)
☐ Multi-County			•	
☐ City of		·		
☐ Oity 01				
3. Type of Statement (Check at least of	ne box)			
Annual: The period covered is January December 31, 2017.	1, 2017, through	Leaving Office: Di (Check one)	ate Left/_	
The period covered is/_ December 31, 2017.	, through	 The period cover leaving office. 	ered is January 1	, 2017, through the date of
Assuming Office: Date assumed		 The period cover the date of leaver 		, through
Candidate: Date of Election	and office sought, i	f different than Part 1:		
4. Schedule Summary (must comp	olete) ► Total number o	of pages including thi	s cover page	:
Schedules attached	_			
Schedule A-1 - Investments - schedu		Schedule C - Income, Loar		
Schedule A-2 - Investments – schedu		Schedule D - Income - Gif		
Schedule B - Real Property – schedule B - Rea	Jie attached	Schedule E - Income - Gif	ts – Travel Paym	ents – schedule attached
✓ None - No reportable interests of	n anv schedule			
5. Verification				
MAILING ADDRESS STREET	CITY		STATE	ZIP CODE
(Business or Agency Address Recommended - Public Do	•			
801 K Street, MS 20-20 DAYTIME TELEPHONE NUMBER	Sacram	ento E-MAIL ADDRESS	CA	95814
(916) 322-9771		ames.donnelly@cons	servation.ca.d	iov
I have used all reasonable diligence in prepar herein and in any attached schedules is true	ing this statement. I have review	red this statement and to the		
I certify under penalty of perjury under th		·	e and correct.	•
Date Signed 2 - 23 - / 8	Sig	gnature <u>fams</u>	Down	16/1
(month, day, year)		(File the orig	rinally signed statement	with your filing official.)
		//		FPPC Form 700 (2017/2018